

## JUSTIFICATION FOR OTHER THAN FULL AND OPEN COMPETITION

1. Contracting Activity: Department of Veterans Affairs (VA)  
Office of Acquisition Operations  
Technology Acquisition Center  
23 Christopher Way  
Eatontown, New Jersey 07724
2. Description of Action: The proposed action is for a 12-month firm fixed-price (FFP) contract with two (2) 12-month option periods for the deployment, user training and software maintenance support of the Medication Reconciliation (MedRec) Tool for the VA Veterans Health Administration (VHA) Veterans Integrated Service Network (VISN) 11.
3. Description of Supplies or Services: The proposed action is for the deployment of MedRec Tool software at seven (7) additional sites located within VISN 11. The MedRec Tool is currently deployed at the VISN 11 site in Ann Arbor, MI. In addition to deployment of the MedRec Tool software at seven (7) additional sites within VISN 11, the Contractor shall provide user training and software maintenance support of the Med Rec Tool at all eight (8) VISN 11 sites (the seven (7) additional sites for deployment and the Ann Arbor, MI site) and the 30 Community Based Outpatient Clinics throughout VISN 11 that will also have access to the MedRec Tool. The MedRec Tool works by combining lists of all medications from multiple sources into a single, easy to manage, master list. The medications are logically ordered so that the user can efficiently and accurately reconcile medications at patient admission and discharge. The MedRec Tool allows the provider to generate patient-friendly lists specifying new, changed, or discontinued medications. Software maintenance support requirements include 24 hours per day, 365 days per year help desk support by phone and email; remote and on site software fixes when issues are detected as well as version releases, patches and updates on a quarterly basis. The Contractor shall also provide user training consisting of four (4) 45-minute live web-based training sessions on a quarterly basis per site for system administration and software tool operations.
4. Statutory Authority: The statutory authority permitting other than full and open competition is 41 U.S.C. 3304(a)(1) as implemented by the Federal Acquisition Regulation (FAR) Subpart 6.302-1 entitled, "Only One Responsible Source and No Other Supplies or Services Will Satisfy Agency Requirements."
5. Rationale Supporting Use of Authority Cited Above: The proposed source for this action is Avicenna Medical Systems (Avicenna) Inc., 3090 DHU Varren Court, Ann Arbor, Michigan (MI), 48105. Avicenna, with assistance from VA software developers conceived, developed, tested and implemented the MedRec Tool at the VA Ann Arbor Healthcare System. Avicenna owns the proprietary code for the MedRec Tool and due to its complexities; the Government does not possess the capability to develop an adequate competitive technical data package. Avicenna does not have any affiliations or agreements in place with any authorized resellers to

resolve technical problems and/or provide maintenance and support. The MedRec tool was created specifically for the VISN 11 Veteran Health Information Systems Technology and Architecture (VistA) medication reconciliation software tool. The MedRec tool is the only known tool that can be fully integrated with the VistA/Computerized Patient Record System (CPRS). The tool also has the ability to assist with VA-specific workflow for all health providers such as special lists for clinical pharmacists that allow them to decide which medications a patient may need upon discharge. These lists have been specifically designed to pull information from the VA pharmacy and would not be included in a standard medication reconciliation product. The ability for the tool to interface with VistA/CPRS and incorporate VA-specific provider workflow is vital as the end product list will need to pull and push information between VistA/CPRS and the software tool in order to promote patient safety. The proprietary MedRec tool was customized specifically and uniquely for VA to be used with and integrated into the VistA/CPRS. MedRec is the only known tool that aggregates medications from multiple VA sites, i.e., other VA medical centers and outpatient clinics, inpatient medications, outpatient medications, suspended/inactive/expired medications, non-VA medications, as well as remote medications found in the separate program VistA Web. The tool then constructs an intuitive single display of medications which allows for a complete, efficient and rational review of a patient's entire prescription medication history and is the basis for perfect reconciliation of these medications. This tool will allow physicians to have a complete picture of the patient's medical history so they can make more informed decisions on future treatment. The tool is both physician-centric and patient-centric because the generated patient-friendly medication list specifies new, changed, or discontinued medications which can be given to the patient if so desired. Prior to possessing this capability, pharmacists and physicians using CPRS had to reconcile medications by frequently relying on incongruent medication lists, which increased the potential of committing a significant medication error and jeopardizing patient safety.

Based upon past experience, it is estimated that it would take at least three years to develop and customize a similar tool to meet VA's requirements. This timeframe is based on the time it took to originally customize the MedRec Tool. In addition to developing interfaces, entering in previous data, and learning the provider workflow information used as inputs that are dependent on the MedRec Tool, data structures would also have to be analyzed and mapped to whatever data structure a new COTS solution would use to allow medication reconciliation and ensure data generated under the existing MedRec tool matches and maps to data under a new tool. If another tool is selected to perform this vital task, it would require recoding, retesting, and recertification for use in the VA environment. Additionally, it would take substantial time to integrate workflows with any other tool as well as build the interface to VistA/CPRS. If VISN 11 does not continue to use the MedRec Tool, providers will not be able to reconcile medications in a timely, efficient manner which will result in an increase in adverse patient events and higher costs because of increased patient complications, increased length of hospital stays, increased emergency room visits and readmissions. No other brand name medication reconciliation software is readily compatible with the current VistA/CPRS system.

Nationally, VA has been looking into finding a solution for Medication Reconciliation and there are no other known viable solutions. A few VA sites have been looking for a solution, but none of the solutions are in production.

6. Efforts to Obtain Competition: Market research was conducted, details of which are in the market research section of this document. This effort did not yield any additional sources that can meet the Government's requirements. There is no competition anticipated for this acquisition. Additionally, the proposed action will be synopsized on the Federal Business Opportunities Page in accordance with FAR 5.201. Any proposals that are received shall be evaluated.

7. Actions to Increase Competition: In order to remove or overcome barriers to competition in future acquisitions for this requirement, the program office will continue to perform market research to ascertain if there are changes in the marketplace that would enable future actions to be competed.

8. Market Research: Market Research was conducted in August 2013 and included internet searches, a review of available products under the National Aeronautics and Space Administration Solutions for Enterprise-Wide Procurement IV Government wide Acquisition Contract and General Services Administration Federal Supply Schedules. The result of the market research yielded no products available that met all of the Governments requirements. Based on the market research, the most similar tool available in the market place is the Medication Reconciliation product developed by Patient Keeper. However, this tool lacks a critical component of VA's technical requirement as it does not interface with VistA/CPRS. As noted above, it is estimated that it would take approximately three years to integrate workflows with the Patient Keeper Medication Reconciliation Tool as well as build the interface to VistA/CPRS. Such a delay would be detrimental as VISN 11 physicians would not be able to reconcile medications in a timely and efficient manner thus increasing risk of medication errors which would impact patient safety and potentially increase the cost of medications due to provision of extra or unnecessary medications. The ability for the tool to interface with VistA/CPRS and incorporate VA specific provider workflow is vital as the end product list will need to pull and push information between VistA/CPRS and the software tool in order to promote patient safety.

Based on the market research above, the Government's technical experts have determined that only Avicenna's MedRec Tool software can meet all of the Government's technical requirements and that Avicenna is the only responsible source as it is the developer and sole provider of the MedRec Tool software and associated deployment, user training and software maintenance.

9. Other Facts: None